



ASC Utilization Report  
State Form 49933 (R3/6-05)  
Indiana State Department of Health  
Acute Care

Status: Finalized

I. Center Identification

Organization Name: MARION EYE SPECIALISTS SURGERY CENTER

Street Address: 711 W. Gardner Drive

City: Marion

County: Grant

Administrator Name: Dixie Hewitt

Administrator Email: Dixie\_Hewitt@ahni.com

ASC Web Address: NA

Fiscal Year: 2019

Accredited:  Yes  No

Name of Accrediting Body: AAAHC

Deemed Status:  Yes  No

Corporate Tax Status:  For Profit  Non Profit

II. Identification of Surgical Resources

Number of operating rooms	2
Number of procedure rooms	1

III. Utilization Statistics

A. Total Patients and Procedures		
Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	1,727	1,779
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
66984	1,193	
66821	323	
66982	87	
67228	47	
0191T	24	
66761	19	
0449T	14	
67145	11	
65756	11	
66250	8	

#### IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter.

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